16. X Other items or information:

Request form.

Search Report.

Application Data Sheet.

534 Rec'd PCT/PTC 03 JUL 2000

U.S. APPLICATION NO CICENOVA	ップフラ		RNATIONAL APPLICATION NO. PCT/IT99/00085			ATTORNEYS DOCI		
17. X The following fees are submitted:						CALCULATIONS PTO USE ONLY		
BASIC NATIONAL FEE (37 CFR 1.492 (a) (1) - (5)):								
Neither international preliminary examination fee (37 CFR 1.482)							·	
and International Search Report not prepared by the EPO or JPO \$ 970.00								
International preliminary examination fee (37 CFR 1.482) not paid to USPTO but International Search Report prepared by the EPO or JPO \$840.00								
International preliminary examination fee (37 CFR 1.482) not paid to USPTO but international search fee (37 CFR 1.445(a)(2)) paid to USPTO								
International preliminary examination fee (37 CFR 1.482) paid to USPTO but all claims did not satisfy provisions of PCT Article 33(1)-(4)								
International preliminary examination fee (37 CFR 1.482) paid to USPTO								
and all claims satisfied provisions of PCT Article 33(1)-(4)						840	1	
The state of the s						0.10	 	
Surcharge of \$130.00 for furnishing the oath or declaration later than 20 30 months from the earliest claimed priority date (37 CFR 1.492(e)).						130	<u> </u>	
·CLAIMS	NUMBER FIL		NUMBER EXTRA	RATE	\$			
Total claims	7 - 20		· 0	x \$18.00	\$	0	-	
Independent claims		=	0 '	x \$78.00	\$	0	 	
MULTIPLE DEPENDENT CLAIM(S) (if applicable) + \$260.00						970	1	
TOTAL OF ABOVE CALCULATIONS = Reduction of 1/2 for filing by small entity, if applicable. A Small Entity Statement							1	
must also be filed (Note 37 CFR 1.9, 1.27, 1.28).					\$	070		
SUBTOTAL =					\$ \$	970	1	
Processing fee of \$130.00 for furnishing the English translation later than 20 30 months from the earliest claimed priority date (37 CFR 1.492(f)).								
TOTAL NATIONAL FEE =					\$	970		
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property +					\$			
TOTAL FEES ENCLOSED =						970		
					An	nount to be refunded:	\$	
						charged:	\$	
a. X A check in the amount of \$ 970 to cover the above fees is enclosed. b. Please charge my Deposit Account No in the amount of \$ to cover the above fees. A duplicate copy of this sheet is enclosed.								
c. X The Commissioner is hereby authorized to charge any additional fees which may be required by 37 CFR 1.16 and 1.17, or credit any overpayment to Deposit Account No. 25-0120. A duplicate copy of this sheet is enclosed.								
NOTE: Where an 1.137 (a) or (b)) m	appropriate ti ust be filed and	me limit I grante	under 37 CFR 1.494 or d to restore the applicat	· 1.495 has not been ion to pending statu	met, ıs.	a petition to re	vive (37 CFR	
Tuly 2 2000							•	
SEND ALL CORRESPONDENCE TO:						enort Carkl		
Young & Thompson SiGNA 745 South 23rd Street Renc						TURE		
2nd Floor						oit Castel		
Arlington, VA 22202								
(703) 521–2297 35,0								
	Cus	stome	r No. 000466	REGIS	TRAT	ION NUMBER		